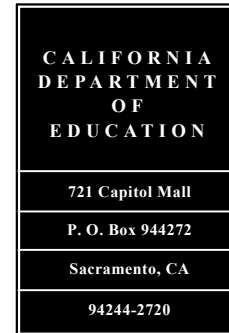




**DELAINE EASTIN**  
State Superintendent of Public Instruction



February 14, 2002

Dear Advanced Placement Coordinators, High School Principals, GATE Coordinators, County Offices of Education, and Superintendents of Districts with High Schools:

**SUBJECT: ADVANCED PLACEMENT (AP) TEST FEE  
REIMBURSEMENT PROGRAM**

This letter is to inform you that the California Department of Education (CDE) will again make State funds available to pay eligible students' AP test fees. The purpose of the AP test fee reimbursement program is to remove the financial barriers that prevent many low-income students in comprehensive high schools from taking the AP end of course test. These funds are made available through the state budget and the enabling legislation (AB 2216, Escutia, chapter 793 of the statutes of 1998).

This year the CDE is changing the process to submit the application (Form C). **In an effort to improve efficiency the CDE is making this application submittal an on-line process.** This site is currently under construction, however once completed will be linked to the web site address [www.cde.ca.gov/pr/ap](http://www.cde.ca.gov/pr/ap). A letter to the district will be forwarded in the near future providing each district with additional procedures, including security.

***Student Eligibility***

Low-income students who are enrolled in an AP class and plan to take the end-of-course AP exam are eligible to participate in the AP Test Fee Payment Program. Upon teacher recommendation, a low-income student who has previously taken an AP class but not the exam, or who, in the teacher's estimation is academically ready to take an AP exam, may also be eligible to participate in the test fee payment program. To determine the family income level for student eligibility, the enclosed income table (Form A) on page 4 titled "**Federal TRIO Program Annual Low Income Level**," provides specific household income eligibility information.

***Ensuring Access by All Students to AP Programs***

High schools are strongly encouraged to take affirmative steps to ensure access for students to AP classes and to promote parent and student awareness of their resources. In addition, recent legislation (SB 1689, Escutia, chapter 73 of the statutes of 2000) requires that all parents and guardians be notified by local education agencies of the availability of their funds for AP test fee payments. SB 1689 established the AP Challenge Grant Program under which a high school would design

and implement a plan that would result in its pupils having access to at least four AP courses in core curriculum areas. During implementation of the AP Challenge initiative, the CDE will be examining the issue of student access and support more closely with districts and schools and other interested parties. We must all work together to ensure that all students have the opportunity to participate and be successful in rigorous academic courses including the AP Program. The awareness and availability of funds to pay for AP test fees is an important part of this effort.

### ***Verification of Student Eligibility***

Districts and schools must document the income eligibility of students participating in the program and maintain verification of need at the school site or at the district level for five years. A sample form, "Student Eligibility Form B" (to document and to verify student eligibility) is provided on page 5.

### ***District Reimbursement***

Districts or schools must pay the College Board for the full cost of the AP test fees as required. After the on-line submission of Form C (Advanced Placement Test Fee Payment Program 2001-02 School Reimbursement Form) the California Department of Education (CDE) will only provide reimbursement for the eligible students who have submitted the on-line application no later than the deadline of **August 16, 2002**. **Please note, this is a firm deadline and requests for reimbursement after that date will not be approved.** After the submission deadline of **August 16, 2002**, districts should allow **approximately 12 weeks for processing and issuance of a check**. In the unlikely event that AP test fee payment requests exceed currently available funds, the CDE will request additional funds. The examination fee will be reimbursed as indicated in Table 1 in column (D).

**Table 1: Student Income Eligibility and District Reimbursement of AP Test Fees**

Household Income (A)	Fee to be Paid by Student (B)	Exam Fee to be Paid to the College Board (C)	District/School Reimbursement (D)
1. Family income does not exceed 150% of the poverty income level.	Student pays \$5 per exam taken. Schools may charge students for tests ordered but not taken.	Student is also eligible for College Board Fee Reduction Program. District/school pays College Board \$49 for each exam, of which \$5 is collected from the student.	CDE will reimburse district \$44 for each exam taken (\$49-\$5 paid by student = \$44). CDE pays only for exams taken.
2. Family income exceeds 150%, but does not exceed 200% of the poverty income level.	Student pays \$5 per exam taken. Schools may charge students for tests ordered but not taken.	Student is not eligible for College Board Fee Reduction Program. District/school pays College Board \$71 for each exam, of which \$5 is collected from the student.	CDE will reimburse district \$66 for each exam taken (\$71-\$5 paid by student = \$66). CDE pays only for exams taken.

3. Family income exceeds 200% of the poverty income level, but student attends a school where 75% or more of the students enrolled are eligible for free or reduced meals. Schools should check with their districts to find out if they have 75% or more student eligibility for free or reduced meals.	Student pays \$5 per exam taken. Schools may charge students for tests ordered but not used.	Student is not eligible for College Board Fee Reduction Program. District/schools pays College Board \$71 for each exam, of which \$5 is collected from the student.	CDE will reimburse district \$66 for each exam taken (\$71-\$5 paid by student = \$66). CDE pays only for exams taken.
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### ***Where to Get More Information***

If you have any questions about the AP Program, please contact Sallie L. Wilson at e-mail address [swilson@cde.ca.gov](mailto:swilson@cde.ca.gov), or telephone number (916) 323-5765. If you have questions about the AP Test Fee Program, please contact Eva Schrepel at e-mail address [eschrepe@cde.ca.gov](mailto:eschrepe@cde.ca.gov) or telephone number (916) 323-5146. This letter, attachments, and the application (when available) can be found at the CDE website address [www.cde.ca.gov/pr/ap](http://www.cde.ca.gov/pr/ap). Districts must submit the 2001-02 School Reimbursement Form C for each of their schools no later than **August 16, 2002**. After completion of the online process, an Assurances page will be printable; which must be signed and returned by mail to:

California Department of Education  
Professional Development and Curriculum Support Division  
Intersegmental Relations Office  
P.O. Box 944272  
Sacramento, CA 94244-2720  
**Attn: Advanced Placement Program**

Please ensure that all students, their parents, and/or guardians are fully aware of, and are provided access to, these important resources.

Sincerely,

JOANNE MENDOZA,  
Deputy Superintendent  
Curriculum & Instructional Leadership Branch

JM:es

Attachments:

Federal TRIO Programs 2001 Annual Low-Income Levels - Form A  
Student Eligibility Form B

## FORM A

### Federal TRIO Programs

#### 2001 Annual Low Income Levels

Effective February 2001 until further notice for the 48 Contiguous States, D.C., and Outlying Jurisdictions

Size of Family Unit	150% Income Level	200% Income Level
1	\$12,885	\$17,180
2	\$17,415	\$23,220
3	\$21,945	\$29,260
4	\$26,475	\$35,300
5	\$31,005	\$41,340
6	\$35,535	\$47,380
7	\$40,065	\$53,420
8	\$44,595	\$59,460

For family units with more than 8 members, add the following amount for each additional family member: \$4,530 for the 48 Contiguous States, the District of Columbia, and outlying jurisdictions.

The figures shown under family income represent amounts equal to 150% and 200% of the family income levels established by the Census Bureau for determining poverty status. The poverty guidelines were published under the U.S. Department of Health and Human Services in the Federal Register, Vol. 66, No. 31, February 16, 2001, pages 10695-10697 and can be found at the U.S. Department of Health and Human Services website address: <http://aspe.hhs.gov/poverty/01poverty.htm>.

## Student Eligibility Form B

### Documentation for the Advanced Placement Test Fee Payment Program

#### ***I. Student Information***

Last Name	First Name	MI	Grade	Date
Name of High School				

#### **II. Check the category by which the student qualifies for the AP Test Fee Payment Program (Students who are eligible for free and reduced meals have a household income that does not exceed 120% of the low-income level.):**

1. ☐ Household income does not exceed 150% of the low income level (income level after tax deductions). This category includes students who are eligible to participate in free or reduced meal programs.
2. ☐ Household income is greater than 150% but does not exceed 200% of the low-income level (income level after tax deductions).
3. ☐ Household income exceeds 200% of the low-income level, but student attends a school where 75% of students enrolled are eligible for free and reduced meals. (If this item is checked, no further verification is needed. You do not need to complete sections III or IV below.)

#### ***III. Family Verification of Need***

I certify that my child is in need of financial assistance to pay for the AP exam fees and that our household income during the preceding year did not exceed \_\_\_\_\_ (indicate 150% or 200%) of the low-income level. I have submitted confirmation of need (please check one only) from \_\_\_\_\_ a government agency or \_\_\_\_\_ a photocopy of my most recently filed federal income tax return to the school.

Signature of Parent or Legal Guardian

Date

#### ***IV. Student Verification of Need***

***(For Students who are 18 years or older and not a dependent.)***

I certify that I am in need of financial assistance to pay for the AP exam fees and my household income does not exceed \_\_\_\_\_ (indicate 150% or 200%) of the low-income level. I have submitted confirmation of need (please check one only) from \_\_\_\_\_ a government agency or \_\_\_\_\_ a photocopy of my most recently filed federal income tax return to the school.

Signature of Student

Date

**\* The district or school must maintain income eligibility documentation at the school site or district level for five years.**